## STATE OF MICHIGAN JUDICIAL CIRCUIT - FAMILY DIVISION COUNTY

## WAIVER OF ATTORNEY OR REQUEST FOR APPOINTMENT OF ATTORNEY

CASENO. PETITION NO.

COUNTY	APPOINTMEN	TOFATTORNEY			
Court address				Cou	ırt telephone no.
In the matter of (name(s), alias(es), DOB)					
	WAIVER O	F ATTORNEY			
<ul> <li>2. I understand I have the right to be the juvenile, and I or the person res for me, the court will appoint an a</li> </ul>	sponsible for my support	cannot afford an atto	orney or	refuses or neglects to re	etain an attorney
Date		Juvenile/Responden	t signatuı	re	
3. I, as parent, guardian, legal custodia	an, or guardian ad litem,	agree with the abov	e waive	er of the assistance of a	n attorney.
Date	Parent/Guardian/Legal custodian/Guardian ad litem signature				
4. I have explained the right to the assis is voluntarily and understandingly m			court rule	e and am satisfied that tl	ne above waiver
Date		Judge/Referee			Bar no.
	REQUESTFOR APPO	INTMENT OF ATTC	RNEY		
5. I declare that I am unable to pay I understand that I may be ordered for a juvenile, that the court may a I authorize the court to investigate of my financial circumstances for	to reimburse the court for ssess some or all of the c and obtain relevant inforr	rall or part of the attor costs against the per nation from my empl	rney fee sons res oyer, cr	s and that when an attor sponsible for the suppo editors, and others who l	ney is appointed rt of the juvenile. nave knowledge
Juvenile signature	Date	Parent/Guardian/Leg	gal custoo	dian/Respondent	Date
Name (type or print)		Name (type or print)			
Address		Address			
City, state and zip	Telephone no.	City, state and zip			Telephone no.
6. Witnessed by: Name				Date	
		Do not write below	v this line	e - For court use only	